Senator Feinstein:

S. RES. 331

Whereas, in the case of United States v. Ellen Rose Hart, CR-F 99-5275 AWI, pending in the United States District Court for the Eastern District of California, testimony has been requested from Eric Vizcaino, an employee in the office of Senator Boxer, and Monica Borvice, an employee in the office of

Whereas, pursuant to sections 703(a) and 704(a)(2) of the Ethics in Government Act of 1978, 2 U.S.C. §§288b(a) and 288c(a)(2), the Senate may direct its counsel to represent employees of the Senate with respect to any subpoena, order, or request for testimony relating to their official responsibilities;

Whereas, by the privileges of the Senate of the United States and Rule XI of the Standing Rules of the Senate, no evidence under the control or in the possession of the Senate may, by the judicial or administrative process, be taken from such control or possession but by permission of the Senate;

Whereas, when it appears that evidence under the control or in the possession of the Senate may promote the administration of justice, the Senate will take such action as will promote the ends of justice consistently with the privileges of the Senate: Now, therefore, be it

Resolved, That Eric Vizcaino, Monica Borvice, and any other employee of the Senate from whom testimony or document production may be required are authorized to testify and produce documents in the case of United States v. Ellen Rose Hart, except concerning matters for which a privilege should be asserted.

SEC. 2. The Senate Legal Counsel is authorized to represent Eric Vizcaino, Monica Borvice, and any Member or employee of the Senate in connection with the testimony and document production authorized in section one of this resolution.

AMENDMENTS SUBMITTED

DEPARTMENT OF LABOR APPROPRIATIONS ACT, 2001

DASCHLE (AND OTHERS) AMENDMENT NO. 3688

Mr. HARKIN (for Mr. DASCHLE (for himself, Mr. KENNEDY, Mr. HARKIN, Mr. DODD, and Mr. ROBB)) proposed an amendment to the bill (H.R. 4577) making appropriations for the Departments of Labor, Health and Human Services, and Education, and related agencies for the fiscal year ending September 30, 2001, and for other purposes; as follows:

On page 92, between lines 4 and 5, insert the following:

TITLE GENETIC NONDISCRIMINATION IN HEALTH INSURANCE AND EMPLOYMENT

SEC. 01. SHORT TITLE.

This title may be cited as the "Genetic Nondiscrimination in Health Insurance and Employment Act of 2000".

Subtitle A—Prohibition of Health Insurance Discrimination on the Basis of Predictive Genetic Information

SEC. ___11. AMENDMENTS TO THE PUBLIC HEALTH SERVICE ACT.

(a) AMENDMENTS RELATING TO THE GROUP MARKET.—

- (1) PROHIBITION OF HEALTH INSURANCE DISCRIMINATION ON THE BASIS OF PREDICTIVE GENETIC INFORMATION OR GENETIC SERVICES —
- (A) NO ENROLLMENT RESTRICTION FOR GENETIC SERVICES.—Section 2702(a)(1)(F) of the Public Health Service Act (42 U.S.C. 300gg—1(a)(1)(F)) is amended by inserting before the period the following: "(or information about a request for or the receipt of genetic services by an individual or a family member of such individual)".
- (B) NO DISCRIMINATION IN GROUP RATE BASED ON PREDICTIVE GENETIC INFORMATION.—
- (i) IN GENERAL.—Subpart 2 of part A of title XXVII of the Public Health Service (42 U.S.C. 300gg-4 et seq.) is amended by adding at the end the following:

"SEC. 2707. PROHIBITING DISCRIMINATION AGAINST GROUPS ON THE BASIS OF PREDICTIVE GENETIC INFORMA-TION.

- "A group health plan, and a health insurance issuer offering group health insurance coverage in connection with a group health plan, shall not deny eligibility to a group or adjust premium or contribution rates for a group on the basis of predictive genetic information concerning an individual in the group (or information about a request for or the receipt of genetic services by such individual or family member of such individual)."
 - (ii) Conforming amendments.—
- (I) Section 2702(b)(2)(A) of the Public Health Service Act (42 U.S.C. 300gg-1(b)(2)(A)) is amended to read as follows:
- "(A) to restrict the amount that an employer may be charged for coverage under a group health plan, except as provided in section 2707; or".
- (II) Section 2721(a) of the Public Health Service Act (42 U.S.C. 300gg-21(a)) is amended by inserting "(other than subsections (a)(1)(F), (b) (with respect to cases relating to genetic information or information about a request or receipt of genetic services by an individual or family member of such individual), (c), (d), (e), (f), or (g) of section 2702 and section 2707)" after "subparts 1 and 3".
- (2) LIMITATIONS ON GENETIC TESTING AND ON COLLECTION AND DISCLOSURE OF PREDICTIVE GENETIC INFORMATION.—Section 2702 of the Public Health Service Act (42 U.S.C. 300gg-1) is amended by adding at the end the following:
- "(c) Genetic Testing.—
- "(1) LIMITATION ON REQUESTING OR REQUIRING GENETIC TESTING.—A group health plan, or a health insurance issuer offering health insurance coverage in connection with a group health plan, shall not request or require an individual or a family member of such individual to undergo a genetic test.
- "(2) RULE OF CONSTRUCTION.—Nothing in this title shall be construed to limit the authority of a health care professional, who is providing treatment with respect to an individual and who is employed by a group health plan or a health insurance issuer, to request that such individual or family member of such individual undergo a genetic test. Such a health care professional shall not require that such individual or family member undergo a genetic test.
- "(d) COLLECTION OF PREDICTIVE GENETIC IN-FORMATION.—Except as provided in subsections (f) and (g), a group health plan, or a health insurance issuer offering health insurance coverage in connection with a group health plan, shall not request, require, collect, or purchase predictive genetic information concerning an individual (or information about a request for or the receipt of genetic services by such individual or family member of such individual).

- "(e) DISCLOSURE OF PREDICTIVE GENETIC INFORMATION.—A group health plan, or a health insurance issuer offering health insurance coverage in connection with a group health plan, shall not disclose predictive genetic information about an individual (or information about a request for or the receipt of genetic services by such individual or family member of such individual) to—
- "(1) any entity that is a member of the same controlled group as such issuer or plan sponsor of such group health plan;
- "(2) any other group health plan or health insurance issuer or any insurance agent, third party administrator, or other person subject to regulation under State insurance laws:
- "(3) the Medical Information Bureau or any other person that collects, compiles, publishes, or otherwise disseminates insurance information;
- ``(4) the individual's employer or any plan sponsor; or
- "(5) any other person the Secretary may specify in regulations.
- "(f) INFORMATION FOR PAYMENT FOR GENETIC SERVICES.—
- "(1) IN GENERAL.—With respect to payment for genetic services conducted concerning an individual or the coordination of benefits, a group health plan, or a health insurance issuer offering group health insurance coverage in connection with a group health plan, may request that the individual provide the plan or issuer with evidence that such services were performed.
- "(2) RULE OF CONSTRUCTION.—Nothing in paragraph (1) shall be construed to—
- "(A) permit a group health plan or health insurance issuer to request (or require) the results of the services referred to in such paragraph; or
- "(B) require that a group health plan or health insurance issuer make payment for services described in such paragraph where the individual involved has refused to provide evidence of the performance of such services pursuant to a request by the plan or issuer in accordance with such paragraph.
- "'(g) Information for Payment of Other Claims.—With respect to the payment of claims for benefits other than genetic services, a group health plan, or a health insurance issuer offering group health insurance coverage in connection with a group health plan, may request that an individual provide predictive genetic information so long as such information—
- "(1) is used solely for the payment of a claim:
- "(2) is limited to information that is directly related to and necessary for the payment of such claim and the claim would otherwise be denied but for the predictive genetic information; and
- "(3) is used only by an individual (or individuals) within such plan or issuer who needs access to such information for purposes of payment of a claim.
 - "(h) Rules of Construction.—
- "(1) COLLECTION OR DISCLOSURE AUTHORIZED BY INDIVIDUAL.—The provisions of subsections (d) (regarding collection) and (e) shall not apply to an individual if the individual (or legal representative of the individual) provides prior, knowing, voluntary, and written authorization for the collection or disclosure of predictive genetic information.
- "(2) DISCLOSURE FOR HEALTH CARE TREAT-MENT.—Nothing in this section shall be construed to limit or restrict the disclosure of predictive genetic information from a health care provider to another health care provider